



~~11/3~~
12/30/03

Response Under 37 CFR §1.116
Expedited Procedure - Group 2674

03500.015364.

PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

ENTERED

LTyson
2/17/04

In re Application of:)
: Examiner: Abbas I. Abdulsalam
KAZUYUKI SHIGETA)
: Group Art Unit: 2674
Application No.: 09/853,662)
: Filed: May 14, 2001)
: For: IMAGE DISPLAY)
: APPARATUS AND METHOD)
: December 17, 2003

RECEIVED

DEC 22 2003

Technology Center 2600

Mail Stop AF
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT AFTER FINAL REJECTION

Sir:

In response to the Office Action dated October 6, 2003, please amend the
above-identified application as follows.



Corres. and Mail
BOX AF

Response Under 37 CFR §1.116
Expedited Procedure - Group 2674

2674
2-200

In re Application of:

Docket No. 03500.015364.

KAZUYUKI SHIGETA

Application No.: 09/853,662

Examiner: Abbas I. Abdulsalam

Filed: May 14, 2001

Group Art Unit: 2674

For: IMAGE DISPLAY APPARATUS AND METHOD

Date: December 17, 2003

MAIL STOP AF
THE COMMISSIONER FOR PATENTS
P.O. Box 1450
Alexandria, VA 22313-1450

RECEIVED

DEC 22 2003

Technology Center 2600

Sir:

Transmitted herewith is an Amendment in the above-identified application.

☒ No additional fee is required.

The fee has been calculated as shown below

CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	* 88	MINUS	** 88	= 0	x \$9 \$18	0
INDEP. CLAIMS	* 16	MINUS	*** 16	= 0	x \$43 \$86	0
Fee for Multiple Dependent claims \$145°/\$290						previously paid
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT---						0

* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

- ☐ Verified Statement claiming small entity status is enclosed, if not filed previously.
- ☐ A check in the amount of \$_____ is enclosed.
- ☐ Charge \$_____ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.
- ☒ Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.
- ☐ A check in the amount of \$_____ to cover the fee for a _____ month extension is enclosed.
- ☐ A check in the amount of \$_____ to cover the Information Disclosure Statement fee is enclosed.
- ☒ Applicant's undersigned attorney may be reached in our Costa Mesa, California office by telephone at (714) 540-8700. All correspondence should continue to be directed to our address given below.

Respectfully submitted,


Attorney for Applicant

Registration No. 39,000

FITZPATRICK, CELLA, HARPER & SCINTO
30 Rockefeller Plaza
New York, New York 10112-3800
Facsimile: (212) 218-2200